

POSITION	ID NO.	DATE
CLASSIFIER	20	10/5/94
EXAMINER	49	10/22/94
TYPIST	335	10/23/94
VERIFIER	WOO	10/26/94
CORPS CORR.		
SPEC. HAND		
FILE MAINT.	452	10/22/94
DRAFTING		

INDEX OF CLAIMS

Claim	Date
1	10/24/94
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SYMBOLS

- ✓ Rejected
- = Allowed
- (Through number) Cancelled
- Restricted
- + Non-elected
- N Interference
- A Appeal
- O Objected

Claim	Date
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